

ALL AMERICAN HORSE CLASSIC

SEPT 12-16, 2023

ENTRIES CLOSE: AUGUST 21, 2023

OWNER'S NAME _____

TRAINER'S NAME _____

SHOW SECRETARY: JUDY McMANAMA, 11930 E 211TH ST, NOBLESVILLE IN 46060 Phone: 317-750-7590

Please type or print. Only one owner per entry form. All entries must be complete. Enclose correct fee, copies of registration papers, purchase contract (if applicable), measurement card, USEF membership cards for each rider, driver, handler, owner, trainer, coach, and amateur certification (if applicable). Owners and trainers of Saddlebreds, Hackneys and Roadsters enclose a copy of ASHA, AHHS and ARHPA membership cards.

	NAME OF HORSE/PONY	REG NO.	MEAS. CARD #	ARHPA #	SEX	COLOR	HEIGHT	YOB
	Sire:			Dam:				
RIDER/DRIVER/HANDLER				JR EXHIB DOB	CLASS NUMBERS		ENTRY FEE	
	NAME OF HORSE/PONY	REG NO.	MEAS. CARD #	ARHPA #	SEX	COLOR	HEIGHT	YOB
	Sire:			Dam:				
RIDER/DRIVER/HANDLER				JR EXHIB DOB	CLASS NUMBERS		ENTRY FEE	
	NAME OF HORSE/PONY	REG NO.	MEAS. CARD #	ARHPA #	SEX	COLOR	HEIGHT	YOB
	Sire:			Dam:				
RIDER/DRIVER/HANDLER				JR EXHIB DOB	CLASS NUMBERS		ENTRY FEE	

Each person signing this entry form acknowledges that he/she has read the front and reverse side of this entry form and agrees to the applicable forms, conditions, waivers and consent as set forth herein. Each person agrees that the information is accurate to the best of his/her knowledge.

Stable With: _____

Horse Arrival Date _____

Horse Departure Date _____

Trainer's Hotel _____

Emergency Contact Number _____

Cell Phone _____

We cannot accept American Express cards
 Check Visa MasterCard Discover
 Account # _____ Exp. Date: _____

A 4% surcharge on credit card payments will be applied

Security Code: _____
 Printed Name On Card _____
 CC Billing Zip Code _____

Signature: _____



ALL AMERICAN HORSE CLASSIC

TOTAL ENTRY FEES _____
 POST ENTRY FEES _____
 \$30 Per Horse _____
 STALLS _____

_____ @ \$175 ea _____
 _____ Tack @ \$175 ea _____

___ AHHS Futurity @ \$150 _____

USEF FEE (Drug + USEF Fee)
 _____ Horses @ \$23 ea _____

VEHICLE PASS _____ @ \$50 ea _____
 OFFICE FEE _____ @ \$30 PER HORSE _____

RINGSIDE
 TABLE _____ @ \$300 PER 6 SEATS _____

TOTAL DUE: _____

MAKE CHECKS PAYABLE TO:
 ALL AMERICAN HORSE CLASSIC

PLEASE COMPLETE REVERSE SIDE

FILL IN ALL INFORMATION ON BOTH SIDES INCLUDING EMAIL ADDRESSES AND EMERGENCY/CELL PHONE NUMBERS

FEDERATION ENTRY AGREEMENT

By entering a Federation-licensed Competition and signing this entry blank as the Owner, Lessee, Trainer, Manager, Agent, Coach, Driver, Rider, Handler, Vaulteur or Longeur and on behalf of myself and my principals, representatives, employees and agents, I agree that I am subject to the Bylaws and Rules of The United States Equestrian Federation, Inc. (the "Federation") and the local rules of The All American Horse Classic (Competition). I agree I am subject to the Bylaws and Rules of the Federation and of the Competition. I will accept as final the decision of the Hearing Committee on any question arising under the Rules, and agree to release and hold harmless the Competition, the Federation, their officials, directors and employees for any action taken under the Rules. I represent that I am eligible to enter and/or participate under the Rules, and every horse I am entering is eligible as entered. I also agree that as a condition of and in consideration of acceptance of entry, the Federation and/or the Competition may use or assign photographs, videos, audios, cablecasts, broadcasts, internet, film, new media or other likenesses of me and my horse taken during the course of the Competition for the promotion, coverage or benefit of the Competition, sport or the Federation. Those likenesses shall not be used to advertise a product and they may not be used in such a way as to jeopardize amateur status. I hereby expressly and irrevocably waive and release any rights in connection with such use, including any claim to compensation, invasion of privacy, right of publicity, or to misappropriation. The construction and application of Federation rules are governed by the laws of the State of New York, and any action instituted against the Federation must be filed in New York State. See GR908.4

BY SIGNING BELOW I AGREE to be bound by all applicable Federation rules and all terms and provisions of this entry blank and all terms and provisions of this Prize List. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

Owner (Mandatory)

Parent/Guardian/Agent if exhibitor is a minor

U.S. Citizen ___Y___ N

Signature _____

Owner

Print Name _____

Address _____

City, State, Zip _____

Cell Phone _____

E-Mail _____

USEF# _____ ASHBA# _____

AHHS # _____ ARHPA # _____

UPHA # _____ ADHHA # _____

Trainer (Mandatory)

Parent/Guardian/Agent if exhibitor is a minor

U.S. Citizen ___Y___ N

Signature _____

Trainer

Print Name _____

Address _____

City, State, Zip _____

Cell Phone _____

E-Mail _____

USEF# _____ ASHBA# _____

AHHS # _____ ARHPA # _____

UPHA # _____ ADHHA # _____

Rider/Driver/Handler/Agent (Mandatory)

*Parent/Guardian/Agent if exhibitor is a minor

U.S. Citizen ___Y___ N

Signature _____

Rider

Print Name _____

Address _____

City, State, Zip _____

Emergency Phone _____

E-Mail _____

USEF # _____ ASHBA # _____

AHHS # _____ ARHPA # _____

UPHA # _____ ADHHA # _____

Ricer or Coach (If applicable)

*Parent/Guardian/Agent if exhibitor is a minor

U.S. Citizen ___Y___ N

Signature _____

Rider or Coach

Print Name _____

Address _____

City, State, Zip _____

Cell Phone _____

E-Mail _____

USEF # _____ ASHBA # _____

AHHS # _____ ARHPA # _____

UPHA # _____ ADHHA # _____